

# REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well  
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Midland, Texas

August 10, 1959

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Great Western Drilling Company

State "VV", Well No. 1

in SE 1/4 NE 1/4

(Company or Operator)

(Lease)

H Unit Letter, Sec. 2, T. 13-S, R. 31-E, NMPM, Caprock Queen Pool

Chaves

County. Date Spudded 7-17-59

Date Drilling Completed 7-23-59

Please indicate location:

Elevation 4397

Total Depth 3052 PBD

Top Oil/Gas Pay 3030

Name of Prod. Form. Queen

PRODUCING INTERVAL -

Perforations

Open Hole 3030-3052

Depth Casing Shoe 3030

Depth Tubing 3040

OIL WELL TEST -

Natural Prod. Test: 2 bbls. oil, 0 bbls water in 4 hrs, 0 min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 88 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 7500 gallons lease crude & 15,000# sand.

Casing Tubing Date first new  
Press. 3100 Press. oil run to tanks August 9, 1959

Oil Transporter Service Pipe Line Company

Gas Transporter None

Remarks:

40-1 (88-112)

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved, 19

Great Western Drilling Company

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]

Title

By: [Signature] O. H. Crews  
(Signature)

Title General Superintendent

Send Communications regarding well to:

Name Great Western Drilling Company

Address P. O. Box 1659, Midland, Texas